

00862.003008

RESPONSE UNDER 37 C.F.R. §1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 2174

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)	
	:	Examiner: S.P. Sax
MASAHIKO YOKOTA	)	
	:	Group Art Unit: 2174
Application No.: 09/388,373	)	
	:	
Filed: September 1, 1999	)	
	:	
For: USER INTERFACE DISPLAY	)	February 10, 2006
APPARATUS AND METHOD OF	:	
CONTROLLING SAME	)	

**Mail Stop AF**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

In response to the final Office Action dated December 14, 2005, the Examiner  
is respectfully requested to amend the above-identified application as follows:

27W  
AF



In re Application of:

Docket No.: 00862.003008

MASAHIKO YOKOTA

Application No.: 09/388,373

Examiner: S.P. Sax

Filed: September 1, 1999

Group Art Unit: 2174

For: USER INTERFACE DISPLAY  
APPARATUS AND METHOD OF  
CONTROLLING SAME

Date: February 10, 2006

**MAIL STOP AF**  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

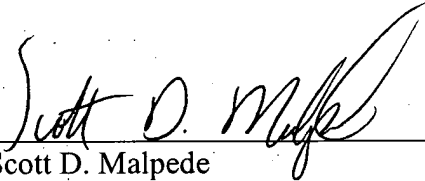
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	25	MINUS	30	= 0	x \$25 \$50	\$ -0-
INDEP. CLAIMS	6	MINUS	8	= 0	x \$100 \$200	\$ -0-
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ -0-

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$ \_\_\_\_ is enclosed.

- ☐ Charge \$\_\_\_\_ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$\_\_\_\_ to cover the fee for a \_\_\_\_ month extension is enclosed.
- ☐ A check in the amount of \$\_\_\_\_ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

  
\_\_\_\_\_  
Scott D. Malpede  
Attorney for Applicant  
Registration No. 32,533

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New York, New York 10112-3801  
Facsimile: (212) 218-2200

SDM:mm

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